

| NYS Validation Rule | NEMIS Field | Validation Rule Description | Rationale |
|---------------------|-----------------|---|---|
| 712 | eArrest.14 | Date/Time of Cardiac Arrest (eArrest.14) Is only required if arrest is after EMS arrival | Date/Time of Cardiac Arrest is only required if cardiac arrest occurs after EMS Arrival. |
| 738 | eCrew.01 | Crew Member ID (eCrew.01) is Blank | Crew Member ID (NYS Licensure) cannot be blank and must be populated with only current certification number. |
| 898 | eDisposition.18 | Additional Transport Mode Descriptors (eDisposition.18) Must Always Be Not Recorded | Not Recorded is the only acceptable value for NYS ePCR Data Submission. |
| 746 | eHistory.06 | Medication Allergies (eHistory.06) is Blank | Medication Allergies must be populated; however, Not Values are excluded. |
| 747 | eHistory.08 | Medical/Surgical History (eHistory.08) is Blank | Medical/Surgical History is Blank with patient contact; however, Not Values are excluded. |
| 748 | eHistory.08 | Current Medications grid (eHistory.12) is Blank | Current Medications must be populated; however, Not Values are excluded. |
| 748 | eHistory.12 | Current Medications grid (eHistory.12) is Blank | Current Medications must be populated; however, Not Values are excluded. |
| 849 | eHistory.18 | Pregnancy Must Be Assessed for Females Patients of Child-Bearing Age | Export changed from Fatal to Warning for 2019; will be changed to Fatal in 2020. |
| 921 | eMedications.11 | Medication Authorization (eMedications.11) Must be Populated if Medication Administered | Medication Authorization must be populated if Medication is Administered by this crew. Medications Administered Prior to Arrival of this Crew excluded. |
| 922 | eMedications.12 | Medication Authorizing Physician (eMedications.12) Must be Populated if Medication is Administered and is Not Standing Protocol | The name of the authorizing physician must be indicated if the medication is administered based on medical control. Medications Administered Prior to Arrival of this Crew and on Standing Protocol excluded. |
| 726 | eProcedures.01 | Date/Time Procedure Performed (eProcedures.01) is Blank | When a procedure is performed, the date/time must be populated. |
| 729 | eProcedures.05 | Number of Procedure Attempts (eProcedures.05) is Blank | Number of Procedure Attempts is required when a procedure is performed; however, Not Values are excluded. |
| 730 | eProcedures.06 | Procedure Successful (eProcedures.06) is Blank | Procedure Successful is a required when a procedure is performed; however, Not Values are excluded. |
| 731 | eProcedures.07 | Procedure Complication (eProcedures.07) is Blank | Procedure Complication is required when a procedure is performed; however, Not Values are excluded. |
| 923 | eProcedures.09 | Procedure Crew Member ID (eProcedures.09) Must be Recorded for All Procedures Performed (Except Procedures Performed PTA) | Procedure Crew Member ID must be recorded / reported for all procedures performed; however, procedures performed PTA are not required and Not Values are excluded. |
| 925 | eProcedures.12 | Procedure Authorizing Physician (eProcedures.12) Must be Completed if Medical Control Order is documented. | Name of Physician authorizing procedure must be documented if medical control order documented. |
| 883 | eProcedures.13 | Vascular Access Location (eProcedures.13) Must Not Be Not Reporting or Not Recorded | Vascular Access Location must be documented for Intraosseous Cannulation, Catheterization of External Jugular Vein or Cateeterization of Vein procedures. |
| 678 | eResponse.03 | Incident Number (eResponse.03) is Blank | Incident Number is a NYS Required Field |
| 920 | eResponse.04 | Response Number (eResponse.04) Must Not Be Blank | EMS Response Number is a NYS Required Field |
| 692 | eScene.09 | Incident Location Type (eScene.09) is Blank | Incident Location Type is required on all 911, Intercept and Mutual Aid repsonses. |
| 693 | eScene.19 | Incident Zip Code (eScene.19) is Blank | Incident Zip Code is blank and unit has arrived on the scene. |
| 935 | eScene.21 | Incident County is a mandatory field | Incident County is a Required Field |
| 694 | eSituation.01 | Date/Time of Symptom Onset/Last Normal (eSituation.01) is Blank | Date/Time of Symptom Onset is required when patient contact is made; Pertinent Negatives are allowed and Not Values are excluded. |
| 698 | eSituation.09 | Primary Symptom (eSituation.09) is Blank | Primary Symptom is required with patient contact on 911, Intercept and Mutual Aid responses. |
| 700 | eSituation.11 | Providers Primary Impression (eSituation.11) is Blank | Provider's Primary Impression is required with patient contact on 911, Intercept and Mutual Aid responses. |

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| 832 | eSituation.18 | Date/Time Last Known Well (eSituation.18) Mst Be reported for CVA/TIA Primary or Secondary Impressions | Date and Time of Last Known Well must be reported when CVA / TIA are Provider's Primary or Secondary Impression; however, PN of Unable to Complete is acceptable. |
| 810 | eTimes.08 | Transfer of EMS Patient Care Date/Time (eTimes.08) Applies for Non-Transport Outcomes. | Transfer of EMS Patient Care Date/Time applies with patient transfer of care in field (and not at destination). |
| 817 | eTimes.12 | Destination Patient Transfer of Care Date/Time (eTimes.12) Not Values | Rule has been updated to allow for Not Values when destination is not a Hospital, Freestanding emergency department or nursing home/assisted living facility. |
| 852 | eVitals.13 | Pulse Rhythm (eVitals.13) cannot be blank if Heart Rate (eVitals.10) is not blank | Pulse Rhythm cannot be populated if Heart Rate is blank. |
| 929 | eVitals.13 | Heart Rate (eVitals.10) Cannot be Populated if Pulse Rhythm (eVitals.13) is Blank | Heart Rate cannot be populated if Pulse Rhythm is blank |
| 857 | eVitals.19 | Rule Deactivated and Replaced by Rule #940 | |
| 933 | eVitals.19 | Rule De-Activated and Replaced by Rule #941 | |
| 940 | eVitals.19 | Glasgow Coma Score-Eye (eVitals.19) Must be Populated for All Altered Mental Status, Stroke, TIA, Overdose or Trauma Patients for Care Provided in New York City | Glasgow Coma Score-Eye (eVitals.19) Must be Populated for All Altered Mental Status, Stroke, TIA, Overdose or Trauma Patients for Care Provided in New York City |
| 941 | eVitals.19 | Glasgow Coma Score (GCS) - Eye (eVitals.19) Must Not Be Not Reporting (for all but care provided in New York City) | Glasgow Coma Score (GCS) - Eye (eVitals.19) Must Not Be Not Reporting (for all but care provided in New York City) |
| 859 | eVitals.20 | Rule Deactivated and Replaced by Rule #942 | |
| 936 | eVitals.20 | Rule De-Activated and Replaced by Rule #943 | |
| 942 | eVitals.20 | Glasgow Coma Score (GCS) - Verbal (eVitals.20) Must Not Be Not Reporting (for all but care provided in New York City) | Glasgow Coma Score (GCS) - Verbal (eVitals.20) Must Not Be Not Reporting (for all but care provided in New York City) |
| 943 | eVitals.20 | Glasgow Coma Score-Verbal (eVitals.20) Must be Populated for All Altered Mental States, Stroke, TIA, Overdose or Trauma Patients for Care Provided in New York City | Glasgow Coma Score-Verbal (eVitals.20) Must be Populated for All Altered Mental States, Stroke, TIA, Overdose or Trauma Patients for Care Provided in New York City |